ton are grantip Harland (plan are fine).

D'A	SEAT APPLICATION Substitut	persons are regulard to	U.S. Pelent and Tra	Approved for use the	PTO/SE/06 PUON 7/81/2008, ONG 06/ DEPARTMENT OF COM
PA	EM APPLICATION	FEE DETERMINA	ong to a collection of infon	nation (moss a die	DEPARTMENT OF COL
	Substitu	le for Form PTO-875	IN WECOKD		The Aniel Olyg control of
	CLAIMS AS FILED -	DADE:		09	192900
	(Column 1)				1-2-100
FOR		(Column 2)	- 8MALL EN	TITY OR	OTHER THAN
BASIC FEE	NUMBER FILED	NUMBER EXTRA		OR .	SMALL ENTIT
(37 CFR 1.16(a))		-10000	RATE	FEE.	
(37 CFR 1.16(c))			- 1 :		PATE. FE
INDEPENDENT OF AUG	: mlnus 20 =	1.		OR	
(37 CFR 1.16(b))	minus 3 e		- ^^ -	OR	X \$
MULTIPLE DEPENDEN	T (V 444.000		X 1=		
		FR 1.16(d))		OR	X1
* If the difference in cal	umn 1 ts less than zero, enter	"O" In activi	1 73	OR	+1
		o in column 2.	- TOTAL		
CLA	ums as amended — F	PARTII		OR .	TOTAL
. •	10-1-				the promotion of the pr
	CLAIMS	(Column 2) (Column 3)	SMALL ENTIT	y OR	Orum
世上の101	REMAINING:	HIGHEST WIMBER · WELLESENT **	CHATCH ENAIL	γ οκ	OTHER THAN SMALL ENTITY
1 3 P	MENDUCATE PR	EVIOUSLY EXTRA	TUTE - AB		- Voulence and
O COR 1.16(c)	Minus "	AID FOR	TION		HATE ADDI-
Z kode pendent		101	x125	——————————————————————————————————————	TIONAL
<u> </u>	Minus "	41		OR X	50
FIRST PRESENTATIO	H OF MULTIPLE DEPENDENT CL		x s/00=	OR - X	200.
	- CHOCKI C	AIM (37 CFR 1.16(d))	+1/80=		
•	•		TOTAL	1	360
(0	Column 1)	olumn 2) (Column 3)	ADD'L FEE	OR ADD	TAL O'L FEE
· 1 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 -		olumn 2) (Column 3)		•	
	AFTER	MBER PRESENT.	RATE ADDI-	1 1/2 4	
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Independent	141102		在一个一个里面。 第一个	1 1111111111111111111111111111111111111	TIONAL
(31 CFR (L16(b))	Minus •••	=	X 1 = 5	OR X.1	=
FIRST PRESENTATION	OF MIN TRUE OF		X 8	1	=-
	OF MULTIPLE DEPENDENT CLAN	4 - COR CER LIGIGIT	editarior anti-received tox	OR XI	====
			TOTAL	TOR" LEE	Colombia Colombia
,	umin 1)		ADDIFEE	OR ADD'L	FEE
C	AIMS	mn 2] (Column 3)			·
REM	AINING NUMB	BER PRESENT	District .	7 1	
Total	IDMENT PREVIO	USLY EXTRA	RATE ADDI-	RAT	- 1
(37 CFR 1:16(c))	Minus 44		- FEE] [TIONAL
Independent	Minus 444		(E		FEE
			=	OR XI	=
FIRST PRESENTATION OF	MULTIPLE DEPENDENT CLAIM	(37 CFR 1 16/40)		OR XE	
			1 =	OR +.	
If the entry in column 4 is	s less than the entry in column reviously Pald For IN THIS SE	4	OTAL DO'L FEE	OR + 1	
Kitha with a woman will I to	s less than the entry in column reviously Paid For IN THIS SP reviously Paid For IN THIS SP	2		OR ADD'L FE	1

The Highest Number Previously Paid For' (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentially is povemed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 mightes to complete application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS